Amendments to the Specification:

Please replace paragraph number [0022] with the following rewritten paragraph:

Each electrode-training pad 120 is disposable and comprises an upper surface layer 122 123, a lower adhesive layer 124, and a conductive layer 126. The upper surface layer 123 of the training pad comprises a flexible plastic or foam material. The upper surface layer 123 of each training pad 120 is color coded with a graphic design 128 on the front surface layer 122 123 of the pads which illustrates the proper placement upon a victim's chest. The design further includes the number 1 or 2 that indicates the proper sequence of placement of the pads 120 upon the simulated victim's chest. The lower adhesive layer 124 of the electrode pads 120 has a removable protective liner 130 which is peeled away by the trainee prior to installation upon the simulated victim. The outer conductive layer 126 is adhered to the lower adhesive layer 124, and is formed of a thin plastic having a metallic or conductive substrate bonded thereto. The outer conductive layer 126 of each electrode training pad 120 acts as a built in sensor means which generates an output signal to the device 10 when the training pad is properly connected to the electrode clip 140 and placed in contact with a conductive target means 170. The conductive target means 170 is preferably an adhesive disc having an outer conductive layer such as metal. The conductive target means 170 are mounted upon a simulated victim's chest in the upper right chest and lower left rib position for defibrillation.

Please replace paragraph number [0023] with the following rewritten paragraph:

The sensor means 126 of the electrode training pad 120 as shown in FIG. 4 in phantom, has a first and second conductive path 132,134 respectively, with said second conductive path 134 preferably being located within the interior of said first conductive path 132, without touching said first conductive path 132. Preferably, each of said paths have an elongated rectangular shape, although other shapes would work for the invention. When the electrode pad 120 is received within the slot of the clip 160, the first and second conductive paths 132,134 of the conductive layer sensor means 126 contact a first and second conducting strip 136,138 mounted upon the interior surface of the first mounting member 144 of the clip housing 142. The first and second conducting strip 136,138 is soldered to a first and second wire of the electrode cable 114 which has been inserted into the rear end of the clip housing 142.

Please replace paragraph number [0024] with the following rewritten paragraph:

Thus in order for the trainee to secure the removable electrode pads 120 to the clips 160 140, the holes 122 of the electrode training pad 120 are inserted through the slot 148 of the clip 160 140 such that the holes 122 and 169 are aligned. Then the clip securing means 160 is rotated into position such that the prongs 168 are inserted into the aligned holes 122 and 169, such that the first and second conducting strip 136,138 of the first mating member of the clip 160 140 contact with the conductive layer 126 of the electrode pads 120. After notched receiving end of the electrode pad 120 is inserted into the slot 148, the securing means 160 of the clip 140 is snapped into place such that the prongs 168 are inserted through holes 169 and 122 of the members and the electrode pad, respectively. When the trainee properly mounts each of the electrode pads within its clip 160 and properly places each electrode training pad 120 over its

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respective target means 170 on the simulated victim's chest, the target means 170 shorts or completes the circuit formed by the first and second conductive paths 132,134. When the circuit is closed, a small current is generated by the device 10 through the first conducting strip 136 and the first conductive path 132, through the target means 170 and then back to the device through the second conductive path 134 and the strip 138, thus indicating that the electrode training pad 120 has been properly placed upon the target 170. Each electrode training pad 120 must be properly placed over its conductive target 170, else the trainee will be continually prompted to "PLACE PADS ON VICTIMS BARE CHEST" until the operation is performed correctly for each pad 120. The trainee will continually be voice prompted until the sequence of operations has been correctly performed.

Please replace paragraph number [0027] with the following rewritten paragraph:

There is shown in FIG. 9, a block diagram illustrating the logical arrangement of a system 200 according to the invention. The invention includes a first and second electronic input device, which is preferably keypads 18 and 50 or other keying means. The invention also includes multiple button switches and LED indicator lights. An energy source 210 such as battery pack provides power to the system. The training device further comprises a central processing unit 220, memory 230 (RAM ROM), and a speech synthesizer unit or chip 240. The speech synthesizer unit 240 further comprises is in electrical communication with an amplifier 250 and a speaker 260, a text to speech translator 270, and a speech chip 280. The speech chip 280 may comprise any chip which furnishes understandable speech suitable for use in the invention. The speech synthesizer unit or chip 240 converts digital data stored in ROM and converts it to analog data.

Please replace paragraph number [0032] with the following rewritten paragraph:

As illustrated in FIGS. 12 & 13, the simulation of a manual defibrillator in AED mode 72 is described as follows. The trainee must press the "AED" switch 52 in order to begin. The trainee is then prompted by the device to place the training electrode pads 120 on the simulated victim's bare chest, with pad "1" to be placed on victim's upper right chest and pad "2" to be positioned on victim's lower left ribs. If the training electrode pads are not placed on the simulated victim in the proper sequence, i.e., first training pad labeled "1" and then training pad labeled "2", the trainee will be continually prompted until the trainee performs the operation in the required sequence. Further, each training electrode pad 120 must be placed such that each of its respective sensors 132, 134 contacts the respective conductive target 170 located on the simulated victim 100 or manikin. The trainee will continue to be prompted until the trainee successfully performs the sequence of operations. The trainee will then be prompted to connect the electrode plug 112 into the plug receptacle 110 of the device 10. If the trainee performs this operation successfully, a jumper 111 113 located within the plug will complete the internal circuit. The device 10 senses that the plug 112 is installed when the jumper 111 113 completes the intended current.

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Please replace paragraph number [0033] with the following rewritten paragraph:

After the training electrode pads 120 and the plug 112 of the electrode cable have been properly installed by the trainee, the trainee is prompted to press the "ANALYZE" switch 54 and to "STAND CLEAR" of the victim. The analyze LED 55 60 will flash on and off while the device simulates the Analyze function of a real defibrillator. The device 10 will have been previously programmed by an instructor or the trainee as described in more detail, below. The device will indicate to the user via voice prompting whether a shock is advised. If a shock is advised, the Analyze LED 55 60 will turn off and the shock LED light 62 will flash on and off, while the trainee is voice prompted "SHOCK ADVISED". If a shock sequence is advised, the trainee will be prompted to "STAND CLEAR" of the victim while a simulated charging tone is emitted from the speaker. The trainee is prompted to "SHOUT ALL CLEAR" and to check if all clear and then press the "SHOCK" key 56. When the "SHOCK" key 56 is pressed, the trainee will hear a simulated shock ready tone of approximately 15 seconds in duration and then a simulated shock delivered tone. Then the Shock LED light 62 will be deactivated. The trainee will be prompted to press the ANALYZE key 54 to repeat the process. If no shock is advised, the Analyze LED 60 is turned off and the trainee is prompted to check the simulated victim's breathing and pulse. If no pulse is detected, the trainee is prompted to do CPR for a 1 minute interval. If no pulse is detected by the simulated defibrillator after the trainee has performed CPR for a set interval of time, the trainee is prompted to check the victim's pulse, and if no pulse is found, to press the Analyze key 54.

Please replace paragraph number [0034] with the following rewritten paragraph:

The shock sequence as described above is programmable by the trainee or instructor using the shock sequence keypad 90 located on the rear panel. Thus the user may program the sequence of shock/no shock heart rhythms. Up to seven shock/no-shock sequences may be programmed. In order to program the device, the set key 92 is toggled on. Adjacent the set key 92 is seven toggle keys 93-99 labeled "1" through "7+", with each numbered key representing the numerical cycle of analyzed heart rhythms. Thus key "1" 93 represents the first cycle of simulated analyzed heart rhythms, key "2" 94 represents the second cycle of simulated analyzed heart rhythms, etc. Thus up to seven cycles may be programmed. In addition, each numerical key has its own LED indicator light 101 located immediately thereabove. The indicator light indicates (i.e., when lit) whether a shockable rhythm has been programmed. When the set key 92 is toggled on, the LED indicator lights 101 will light up if a shockable rhythm is desired for its respective numerical cycle. If the LED indicator light 101 is not lit, then the device will not recommend a shockable rhythm for that particular cycle. For example, if the American Heart sequence recommended teaching shock is : shock:shock:no Association shock:shock, then keys 1-3 and keys 5-7 will be toggled on such the that their respective LED indicator lights 100 101 are lit. When finished programming, the set key 92 is toggled off.

Please replace paragraph number [0036] with the following rewritten paragraph:

The Shock Sequence panel 90 also provides for the simulation of a manual, semi-automatic or automatic defibrillator by programming the Analyze key [111] 105. The simulation of a semi-automatic defibrillator is the same as the manual defibrillator as described above, except the trainee is not prompted to press the Analyze key after it has been pressed once by the trainee. The simulation of an automatic defibrillator is the same as the above description, except

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the trainee is not prompted to press the ANALYZE key at anytime, as the device automatically goes into the simulated Analyze mode.

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